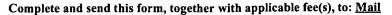
## PART B - FEE(S) TRANSMITTAL



Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

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INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

7590

05/04/2004

Killworht, Gottman Hagan & Schaeff, L.L.P. Suite 500 One Dayton Centre Dayton, OH 45402-2023



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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

| 33,758Depositor's name) | No. | r Reg. | . Prior | a I | Patrici |
|-------------------------|-----|--------|---------|-----|---------|
| (Signature)             | ùn. | (Dr    | ra ol   | Ju  | Gax     |
| (Date)                  |     |        |         |     | August  |
|                         |     |        |         |     |         |

| APPLICATION NO.        | FILING DATE        | FIRST NAME             | DINVENTOR             | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|------------------------|--------------------|------------------------|-----------------------|---------------------|------------------|
| 09/811,919             | 03/19/2001         | John D.                | Affinito              | BAT 0029 IA         | 8947             |
| TITLE OF INVENTION: PI | LASMA ENHANCED CHE | MICAL DEPOSITION FOR H | GH AND/OR LOW INDEX C | F REFRACTION POLYME | RS               |
|                        |                    |                        |                       |                     |                  |
|                        |                    |                        |                       |                     |                  |
| APPLN. TYPE            | SMALL ENTITY       | ISSUE FEE              | PUBLICATION FEE       | TOTAL FEE(S) DUE    | DATE DUE         |

| nonprovisional  | NO                                  | \$1330           | )  | \$300  | \$163                                  | 0 08/04/2004         |
|---|-------------------------------------|------------------|--|--|--|----------------------|
| EXAMINE   | ER                                  | ART UN           | IT   | CLASS-SUBCLASS   | 7                                      |                      |
| CHEN, BRI   | ET P                                | 1762             |  | 427-488000   | _                                      |                      |
| 1. Change of correspondence ad CFR 1.363).  Change of correspondence Address form PTO/SB/122).  The Fee Address indication (PTO/SB/47; Rev 03-02 or m Number is required. | e address (or Change o<br>attached. | f Correspondence | names of u<br>agents OR,<br>firm (having<br>agent) and t | ng on the patent front page,<br>p to 3 registered patent a<br>alternatively, (2) the name<br>as a member a registered<br>he names of up to 2 regist<br>agents. If no name is listered. | of a single attorney or 2 tered patent | Dinsmore & Shohl LLP |

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Battelle Memorial Institute

Richland, Washington

| Please check the appropriate assignee category or category | ries (will not be printed on the patent); | individual   | Corporation or other private group entity | 2 governmen |  |  |  |
|--|---|--|---|-------------|--|--|--|
| 4a. The following fee(s) are enclosed:                     | 4b. Payment of Fee(s):                    |  |   |             |  |  |  |
| 😾 Issue Fee  | KA check in the amou                      | ant of the fee(s)  | is enclosed.                              |             |  |  |  |
| Publication Fee  | Payment by credit c                       | ☐ Payment by credit card. Form PTO-2038 is attached.   |   |             |  |  |  |
| Advance Order - # of Copies                                | The Director is her Deposit Account Num   | O The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number(enclose an extra copy of this form). |   |             |  |  |  |

| (Authorized Signature) | Pota         | zeige        | A.Pri        | (Date)      | ā        |          |
|------------------------|--------------|--------------|--------------|-------------|----------|----------|
| Patricia I.            | Prior        | Reg No       | 33.7         | 58 08       | 3/02/2   | 004      |
| NOTE; The Issue Fe     | e and Public | cation Fee ( | if required) | will not be | accepted | from any |

other than the applicant; a registered attorney or agent; or the assignee or oth interest as shown by the records of the United States Patent and Trademark Office. other party in

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PTO/SB/17 (10-03)

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## FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

(\$) 1,630.00 TOTAL AMOUNT OF PAYMENT

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|-------------------------------|--|--|--|--|--|
| Complete if Known             |  |  |  |  |  |
| Application Number            | 09/811,919   |  |  |  |  |
| Filing Date                   | March 19, 2001   |  |  |  |  |
| First Named Inventor          | John D. Affinito   |  |  |  |  |
| Examiner Name                 | Bret P. Chen   |  |  |  |  |
| Art Unit                      | 1762   |  |  |  |  |
| Attorney Docket No.           | BAT 0029 IA/31089.82   |  |  |  |  |

| METHOD OF PAYMENT (check all that apply)  | FEE CALCULATION (continued)  |          |  |  |
|---|--|----------|--|--|
| ✓ Check Credit card Money Other None  | her None 3. ADDITIONAL FEES  |          |  |  |
| Deposit Account:  | Large Entity   Small Entity  |          |  |  |
| Deposit   | Fee Fee Fee Fee Fee Description  | Fee Paid |  |  |
| Account<br>Number   | 1051 130 2051 65 Surcharge - late filing fee or oath                                       |          |  |  |
| Deposit<br>Account  | 1052 50 2052 25 Surcharge - late provisional filing fee or cover sheet                     |          |  |  |
| Name The Director is authorized to: (check all that apply)  | 1053 130 1053 130 Non-English specification  | -        |  |  |
| Charge fee(s) indicated below Credit any overpayments   | 1812 2,520 1812 2,520 For filing a request for ex parte reexamin                           | ation    |  |  |
| Charge any additional fee(s) or any underpayment of fee(s)  | 1804 920* 1804 920* Requesting publication of SIR prior to<br>Examiner action              |          |  |  |
| Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account. | 1805 1,840* 1805 1,840* Requesting publication of SIR after Examiner action                |          |  |  |
|   | 1251 110 2251 55 Extension for reply within first month                                    |          |  |  |
| FEE CALCULATION   | 1252 420 2252 210 Extension for reply within second month                                  |          |  |  |
| 1. BASIC FILING FEE Large Entity Small Entity   | 1253 950 2253 475 Extension for reply within third month                                   |          |  |  |
| Fee Fee Fee Fee Fee Description Fee Paid Code (\$) Code (\$)                                      | 1254 1,480 2254 740 Extension for reply within fourth month                                |          |  |  |
| 1001 770 2001 385 Utility filing fee  | 1255 2,010 2255 1,005 Extension for reply within fifth month                               |          |  |  |
| 1002 340 2002 170 Design filing fee   | 1401 330 2401 165 Notice of Appeal   |          |  |  |
| 1003 530 2003 265 Plant filing fee  | 1402 330 2402 165 Filing a brief in support of an appeal                                   |          |  |  |
| 1004 770 2004 385 Reissue filing fee  | 1403 290 2403 145 Request for oral hearing   |          |  |  |
| 1005 160 2005 80 Provisional filing fee   | 1451 1,510 1451 1,510 Petition to institute a public use proceed                           | ing      |  |  |
| SUBTOTAL (1) (\$) 0.00  | 1452 110 2452 55 Petition to revive - unavoidable  |          |  |  |
| 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE   | 1453 1,330 2453 665 Petition to revive - unintentional                                     | 4 000 00 |  |  |
| Fee from  | 1501 1,330 2501 665 Utility issue fee (or reissue)   | 1,330.00 |  |  |
| Extra Claims below Fee Paid  Total Claims 20** = X =  | 1502 480 2502 240 Design issue fee   |          |  |  |
| Total Claims  | 1503 640 2503 320 Plant issue fee  |          |  |  |
| Claims - 3 - 2 - 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3  | 1460 130 1460 130 Petitions to the Commissioner  |          |  |  |
| · ' '   | 1807 50 1807 50 Processing fee under 37 CFR 1.17(q)  |          |  |  |
| Large Entity   Small Entity Fee Fee   Fee Fee Fee Description                                     | 1806 180 1806 180 Submission of Information Disclosure St                                  | mt       |  |  |
| Code (\$)   Code (\$)   1202   18   2202   9   Claims in excess of 20                             | 8021 40 8021 40 Recording each patent assignment per property (times number of properties) |          |  |  |
| 1202 18 2202 9 Claims in excess of 20<br>1201 86 2201 43 Independent claims in excess of 3        | 1809 770 2809 385 Filing a submission after final rejection (37 CFR 1.129(a))              |          |  |  |
| 1203 290 2203 145 Multiple dependent claim, if not paid   | 1810 770 2810 385 For each additional invention to be                                      |          |  |  |
| 1204 86 2204 43 ** Reissue independent claims over original patent                                | examined (37 CFR 1.129(b))  1801 770 2801 385 Request for Continued Examination (R         | CE)      |  |  |
| 1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent                         | 1802 900 1802 900 Request for expedited examination of a design application                |          |  |  |
|   | Other fee (specify) Publication Fee  | 300.00   |  |  |
| SUBTOTAL (2) (\$) 0.00  **or number previously paid, if greater; For Reissues, see above          | *Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)  | 1,630.00 |  |  |
| or number previously paid, it greater, i or relissues, see above                                  | · (*/  |          |  |  |

(Complete (if applicable)) SUBMITTED BY Registration No. Name (Print/Type) Patricia L. Prior 33.758 Telephone (937) 449-6400 August 2, 2004 Date Signature

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